

Fill in this information to identify your case and this filing:

Debtor 1	Angel <small>First Name</small>	L. <small>Middle Name</small>	Moina <small>Last Name</small>
Debtor 2 (Spouse, if filing)	Jennifer <small>First Name</small>	Janet <small>Middle Name</small>	Moina <small>Last Name</small>
United States Bankruptcy Court for the SOUTHERN DISTRICT OF NEW YORK			
Case number (if known)	16-10253		

☒ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☒ No. Go to Part 2.
☐ Yes. Where is the property?

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here..... →

\$0.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☒ No
☐ Yes

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
☐ Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here..... →

\$0.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

- ☐ No
☒ Yes. Describe Used furniture, appliances

\$1,200.00

Debtor 1 **Angel** **L.** **Moina** Case number (if known) **16-10253**
First Name Middle Name Last Name

7. Electronics

*Examples:*Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners;
music collections; electronic devices including cell phones, cameras, media players, games

☐ No

☒ Yes. Describe **Used Television, radio, computer** **\$800.00**

8. Collectibles of value

*Examples:*Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects;
stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☒ No

☐ Yes. Describe

9. Equipment for sports and hobbies

*Examples:*Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis;
canoes and kayaks; carpentry tools; musical instruments

☒ No

☐ Yes. Describe

10. Firearms

*Examples:*Pistols, rifles, shotguns, ammunition, and related equipment

☒ No

☐ Yes. Describe

11. Clothes

*Examples:*Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe **Used men's women's children's clothing** **\$1,100.00**

12. Jewelry

*Examples:*Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,
gold, silver

☐ No

☒ Yes. Describe **\$1,000.00**

13. Non-farm animals

*Examples:*Dogs, cats, birds, horses

☒ No

☐ Yes. Describe

14. Any other personal and household items you did not already list, including any health aids you did not list

☒ No

☐ Yes. Give specific
information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here..... →

\$4,100.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

**Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.

Debtor 1 **Angel** **L.** **Moina** Case number (if known) **16-10253**
First Name Middle Name Last Name

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

☒ Yes..... Cash: **\$800.00**

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☒ No

☐ Yes..... Institution name:

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No

☐ Yes..... Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

☒ No

☐ Yes. Give specific information about them..... Name of entity: % of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. *Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

☒ No

☐ Yes. Give specific information about them..... Issuer name:

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No

☐ Yes. List each account separately. Type of account: Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No

☐ Yes..... Institution name or individual:

23. Annuities (A contract for a specific periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes..... Issuer name and description:

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

☒ No

☐ Yes. Give specific information about them

Debtor 1 Angel L. Moina Case number (if known) 16-10253
First Name Middle Name Last Name

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific
information about them

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific
information about them

Money or property owed to you?

**Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.

28. Tax refunds owed to you

☐ No

☒ Yes. Give specific information
about them, including whether
you already filed the returns
and the tax years.....

Federal: 2015 Tax Refund. Amt: \$9,162.00

Federal: \$9,162.00

State: \$0.00

Local: \$0.00

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information

Alimony: \$0.00

Maintenance: \$0.00

Support: \$0.00

Divorce settlement: \$0.00

Property settlement: \$0.00

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☒ No

☐ Yes. Name the insurance
company of each poli
and list its value.....

Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

☒ No

☐ Yes. Give specific information

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☒ No

☐ Yes. Describe each claim

Debtor 1 **Angel** **L.** **Moina** Case number (if known) **16-10253**
First Name Middle Name Last Name

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

☒ No

☐ Yes. Describe each claim _____

35. Any financial assets you did not already list

☒ No

☐ Yes. Give specific information _____

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here..... →

\$9,962.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

☒ No. Go to Part 6.

☐ Yes. Go to line 38.

**Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.

38. Accounts receivable or commissions you already earned

☒ No

☐ Yes. Describe _____

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones,
desks, chairs, electronic devices

☒ No

☐ Yes. Describe _____

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

☒ No

☐ Yes. Describe _____

41. Inventory

☒ No

☐ Yes. Describe _____

42. Interests in partnerships or joint ventures

☒ No

☐ Yes. Describe Name of entity:

% of ownership:

43. Customer lists, mailing lists, or other compilations

☒ No

☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

☐ No

☐ Yes. Describe _____

44. Any business-related property you did not already list

☒ No

☐ Yes. Give specific information.

Debtor 1 Angel L. Moina Case number (if known) 16-10253
First Name Middle Name Last Name

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here..... → \$0.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

Current value of the
portion you own?
Do not deduct secured
claims or exemptions.

47. **Farm animals**
Examples: Livestock, poultry, farm-raised fish

- ☒ No
☐ Yes..

48. **Crops--either growing or harvested**

- ☒ No
☐ Yes. Give specific
information.....

49. **Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

- ☒ No
☐ Yes..

50. **Farm and fishing supplies, chemicals, and feed**

- ☒ No
☐ Yes..

51. **Any farm- and commercial fishing-related property you did not already list**

- ☒ No
☐ Yes. Give specific
information.....

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here..... → \$0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. **Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

- ☒ No
☐ Yes. Give specific information.

54. Add the dollar value of all of your entries from Part 7. Write that number here..... → \$0.00

Debtor 1 Angel L. Moina Case number (if known) 16-10253
First Name Middle Name Last Name

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2.....	→	<u>\$0.00</u>
56. Part 2: Total vehicles, line 5	<u>\$0.00</u>	
57. Part 3: Total personal and household items, line 15	<u>\$4,100.00</u>	
58. Part 4: Total financial assets, line 36	<u>\$9,962.00</u>	
59. Part 5: Total business-related property, line 45	<u>\$0.00</u>	
60. Part 6: Total farm- and fishing-related property, line 52	<u>\$0.00</u>	
61. Part 7: Total other property not listed, line 54	<u>+</u> <u>\$0.00</u>	
62. Total personal property. Add lines 56 through 61.....	<div><u>\$14,062.00</u></div>	Copy personal property total → <u>+</u> <u>\$14,062.00</u>
63. Total of all property on Schedule A/B. Add line 55 + line 62.....		<div><u>\$14,062.00</u></div>

Fill in this information to identify your case:

Debtor 1	Angel First Name	L. Middle Name	Moina Last Name
Debtor 2 (Spouse, if filing)	Jennifer First Name	Janet Middle Name	Moina Last Name
United States Bankruptcy Court for the SOUTHERN DISTRICT OF NEW YORK			
Case number (if known)	16-10253		

☒ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If space is needed, fill out and attach to this page as many copies of this Schedule C as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so

is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
---	--------------------------------------	-----------------------------------	------------------------------------

Copy the value from Schedule A/B ☐ Check only one box for

Brief description:
Used furniture, appliances

Line from Schedule A/B: 6

\$1,200.00

☒
☐

\$1,200.00

100% of fair market value, up to any

Brief description:
Used Television, radio, computer

Line from Schedule A/B: 7

\$800.00

☒
☐

\$800.00

100% of fair market value, up to any

3. Are you claiming a homestead exemption of more than \$155,675?

(Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
☐ No
☐ Yes

Debtor 1 **Angel** **L.** **Moina** Case number (if known) **16-10253**
First Name Middle Name Last Name

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Brief description: Used men's women's children's clothing Line from Schedule A/B: <u>11</u>	Copy the value from Schedule A/B <u>\$1,100.00</u>	Check only one box for <input checked="" type="checkbox"/> <u>\$1,100.00</u> <input type="checkbox"/> 100% of fair market value, up to any	N.Y. CPLR § 5205(a)
Brief description: Watch, rings, costume jewelry Line from Schedule A/B: <u>12</u>	<u>\$1,000.00</u>	<input checked="" type="checkbox"/> <u>\$1,000.00</u> <input type="checkbox"/> 100% of fair market value, up to any	N.Y. CPLR § 5205(a)
Brief description: Emergency funds Line from Schedule A/B: <u>16</u>	<u>\$800.00</u>	<input checked="" type="checkbox"/> <u>\$800.00</u> <input type="checkbox"/> 100% of fair market value, up to any	N.Y. CPLR § 5205(a)
Brief description: 2015 Tax Refund Line from Schedule A/B: <u>28</u>	<u>\$9,162.00</u>	<input checked="" type="checkbox"/> <u>\$9,162.00</u> <input type="checkbox"/> 100% of fair market value, up to any	N.Y. CPLR § 5205(a)
Brief description: 2015 Tax Refund (2nd exemption claimed for this asset) Line from Schedule A/B: <u>28</u>	<u>\$9,162.00</u>	<input checked="" type="checkbox"/> <u>\$0.00</u> <input type="checkbox"/> 100% of fair market value, up to any	

Fill in this information to identify your case:

Debtor 1	Angel <small>First Name</small>	L. <small>Middle Name</small>	Moina <small>Last Name</small>
Debtor 2 (Spouse, if filing)	Jennifer <small>First Name</small>	Janet <small>Middle Name</small>	Moina <small>Last Name</small>
United States Bankruptcy Court for the SOUTHERN DISTRICT OF NEW YORK			
Case number (if known)	16-10253		

☒ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed on *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.
☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim

**Priority
amount**

**Nonpriority
amount**

Debtor 1 **Angel** **L.** **Moina** Case number (if known) **16-10253**
First Name Middle Name Last Name

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with you other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim,

Total claim

\$59,000.00

4.1

142 Broadway Assoc. LLC

Nonpriority Creditor's Name

c/o Heiberger & Assoc. PC

Number Street

589 8th Ave., 10th fl.

New York

NY

10018

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **O R E 5**

When was the debt incurred? **2013**

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Commercial Rent, Fees

4.2

3480-3496 Broadway Assoc.

Nonpriority Creditor's Name

c/o Cullen & Troia, P.C.

Number Street

2 Rector St., Ste. 903

New York

NY

10006

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **O R E 6**

When was the debt incurred? **2011**

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Commercial Rent, Fees--La Posada

\$41,000.00

Debtor 1 **Angel** **L.** **Molina** Case number (if known) **16-10253**
First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.3

\$2,784.00

AMERICAN EXPRESS

Nonpriority Creditor's Name

P.O. Box 650448

Number Street

Dallas TX 75265-0448

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **2 5 7 7**

When was the debt incurred? **10/1/2008**

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Credit Card

4.4

\$2,025.00

Capital One

Nonpriority Creditor's Name

26525 N RIVERWOODS BLVD

Number Street

Lake Forest IL 60045

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **3 4 7 3**

When was the debt incurred? **More than 10**

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Credit Card

Debtor 1 **Angel** **L.** **Moina** Case number (if known) **16-10253**
First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.5

\$10,896.00

CAPITAL ONE BANK USA N

Nonpriority Creditor's Name

15000 CAPITAL ONE DR

Number Street

Henrico

VA

23238

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **1 3 7 7**

When was the debt incurred? **4/1/2012**

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Credit Card

4.6

\$5,998.00

CHASE CARD

Nonpriority Creditor's Name

PO Box 15298

Number Street

Wilmington

DE

19850

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **8 4 1 2**

When was the debt incurred? **6/1/2005**

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Credit Card

Debtor 1 **Angel** **L.** **Moina** Case number (if known) **16-10253**
First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$11,639.00

4.7

CHASE CARD

Nonpriority Creditor's Name

PO BOX 15298

Number Street

Wilmington

DE

19850

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **8 4 1 2**

When was the debt incurred? **10/1/2008**

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Non-Purchase Money

4.8

GIBLIN & LYNCH

Nonpriority Creditor's Name

10 Garber Square

Number Street

Ste. 2

Ridgewood

NJ

07450

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **1 0 0 0**

When was the debt incurred? **2014**

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Attorney for - Collection

\$104,603.00

Debtor 1 **Angel** **L.** **Moina** Case number (if known) **16-10253**
First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$400.00

4.9

MCYDSNB

Nonpriority Creditor's Name

9111 DUKE BLVD

Number Street

Mason

OH

45040

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **X X X X**

When was the debt incurred? **12/1/2004**

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Credit Card

4.10

\$10,783.00

New York and Presbyterian Hospital

Nonpriority Creditor's Name

161 Fort Washington Ave # 206

Number Street

New York

NY

10032

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Judgment

Last 4 digits of account number

When was the debt incurred? **1/30/2013**

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Medical

Debtor 1 **Angel** **L.** **Moina** Case number (if known) **16-10253**
First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.11

\$41,452.00

New York State Tax and Finance

Nonpriority Creditor's Name

Building 9

Number Street

W,A, Harriman Campus

Albany

NY

12229

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Judgment

Last 4 digits of account number **3 7 8 0**

When was the debt incurred? **7/8/2014**

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Taxes

4.12

\$259,864.00

New York State Tax and Finance

Nonpriority Creditor's Name

Building 9

Number Street

W,A, Harriman Campus

Albany

NY

12229

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Judgment

Last 4 digits of account number **4 6 3 2**

When was the debt incurred? **11/6/2013**

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Taxes

Debtor 1 **Angel** **L.** **Moina** Case number (if known) **16-10253**
First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.13

\$5,338.00

New York State Tax and Finance

Nonpriority Creditor's Name

Building 9

Number Street

W.A. Harriman Campus

Albany

NY

12229

City State ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

When was the debt incurred? **11/6/2013**

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Taxes

4.14

\$27,914.00

New York State Tax and Finance

Nonpriority Creditor's Name

Building 9

Number Street

W.A. Harriman Campus

Albany

NY

12229

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Judgment

Last 4 digits of account number **0 7 5 5**

When was the debt incurred? **7/29/2014**

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Taxes

Debtor 1 **Angel** **L.** **Moina** Case number (if known) **16-10253**
First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.15

\$5,338.00

New York State Tax and Finance

Nonpriority Creditor's Name

Building 9

Number Street

W.A. Harriman Campus

Albany

NY

12229

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☒ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Judgment

4.16

\$1,479,698.42

NYS DEPT OF LABOR

Nonpriority Creditor's Name

Averell Harriman State Office Campus

Number Street

Building 12, Room 116

Albany

NY

12240

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **4 6 3 4**

When was the debt incurred? **11/6/2013**

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Taxes

Last 4 digits of account number

When was the debt incurred? **07/25/2013**

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Judgment--Wage and Hour case

Debtor 1 **Angel** **L.** **Moina** Case number (if known) **16-10253**
First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.17

\$74,000.00

NYS WORKERS' COMP BOARD

Nonpriority Creditor's Name

FINANCE OFFICE. ASSESSMENT UNIT

Number Street

328 STATE ST. RM 331

SCHENECTADY.

NY

12305

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **6 1 6 4**

When was the debt incurred? **9/2014**

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Workers Comp. Assessment--La Posada Restaurant

4.18

\$2,471.00

PORTFOLIO RECOVERY ASS

Nonpriority Creditor's Name

120 CORPORATE BLVD STE 1

Number Street

Norfolk

VA

23502

City

State

ZIP Code

Who incurred the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number **3 4 7 3**

When was the debt incurred? **9/1/2012**

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Credit Card

Debtor 1 **Angel** **L.** **Moina** Case number (if known) **16-10253**
First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. <u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$0.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here	6d. + <u>\$0.00</u>
	6e. Total. Add lines 6a through 6d.	6d. <u>\$0.00</u>

		Total claim
Total claims from Part 2	6f. Student loans	6f. <u>\$0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here	6i. + <u>\$2,145,203.42</u>
	6j. Total. Add lines 6f through 6i.	6j. <u>\$2,145,203.42</u>

Fill in this information to identify your case:

Debtor 1	Angel First Name	L. Middle Name	Moina Last Name
Debtor 2 (Spouse, if filing)	Jennifer First Name	Janet Middle Name	Moina Last Name
United States Bankruptcy Court for the SOUTHERN DISTRICT OF NEW YORK			
Case number (if known)	16-10253		

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed
Occupation		
Employer's name		
Employer's address	Number Street 	Number Street
	City State Zip Code	City State Zip Code

How long employed there? _____

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (include all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$0.00	\$0.00
3. Estimate and list monthly overtime pay.	3. + \$0.00	\$0.00
4. Calculate gross income. Add line 2 + line 3.	4. \$0.00	\$0.00

Debtor 1 **Angel** **L.** **Moina** Case number (if known) **16-10253**
First Name Middle Name Last Name

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here → 4.	\$0.00	\$0.00
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	\$0.00	\$0.00
5b. Mandatory contributions for retirement plans	\$0.00	\$0.00
5c. Voluntary contributions for retirement plans	\$0.00	\$0.00
5d. Required repayments of retirement fund loans	\$0.00	\$0.00
5e. Insurance	\$0.00	\$0.00
5f. Domestic support obligations	\$0.00	\$0.00
5g. Union dues	\$0.00	\$0.00
5h. Other deductions. Specify: _____	\$0.00	\$0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	\$0.00	\$0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	\$0.00	\$0.00
8. List all other income regularly received:		
8a. Net income from rental property and from operating a Attach a statement for each property and business showing gross receipts, ordinary and necessary business	\$0.00	\$0.00
8b. Interest and dividends	\$0.00	\$0.00
8c. Family support payments that you, a non-filing spouse, or a Include alimony, spousal support, child support, maintenance,	\$0.00	\$0.00
8d. Unemployment compensation	\$0.00	\$600.00
8e. Social Security	\$0.00	\$0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance) Specify: USDA SNAP	\$0.00	\$429.00
8g. Pension or retirement income	\$0.00	\$0.00
8h. Other monthly income. Specify: _____	\$0.00	\$0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	\$0.00	\$1,029.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	\$0.00	\$1,029.00
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Specify: _____		\$0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.		\$1,029.00
13. Do you expect an increase or decrease within the year after you file this form? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____	None.	

Fill in this information to identify your case:

Debtor 1	Angel <small>First Name</small>	L. <small>Middle Name</small>	Moina <small>Last Name</small>
Debtor 2 (Spouse, if filing)	Jennifer <small>First Name</small>	Janet <small>Middle Name</small>	Moina <small>Last Name</small>
United States Bankruptcy Court for the SOUTHERN DISTRICT OF NEW YORK			
Case number (if known)	16-10253		

☒ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages,

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☒ Married
☐ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?
(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No
☐ Yes. Make sure you fill out Schedule H: Your Codebtor(s) (Official Form 106H).

Debtor 1 **Angel** **L.** **Moina** Case number (if known) **16-10253**
First Name Middle Name Last Name

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Check all that apply.	Sources of income Check all that apply.
	Gross income (before deductions and exclusions)	Gross income (before deductions and exclusions)
From January 1 of the current year until	<input checked="" type="checkbox"/> Wages, commissions, <input type="checkbox"/> Operating a business	<input checked="" type="checkbox"/> Wages, commissions, <input type="checkbox"/> Operating a business
	\$1,200.00	\$1,000.00
For the last calendar year: (January 1 to December 31 ²⁰¹⁵) YYYY	<input checked="" type="checkbox"/> Wages, commissions, <input checked="" type="checkbox"/> Operating a business	<input checked="" type="checkbox"/> Wages, commissions, <input type="checkbox"/> Operating a business
	\$2,421.00	\$16,150.00
For the calendar year before that: (January 1 to December 31 ²⁰¹⁴) YYYY	<input type="checkbox"/> Wages, commissions, <input checked="" type="checkbox"/> Operating a business	<input checked="" type="checkbox"/> Wages, commissions, <input type="checkbox"/> Operating a business
	\$20,410.00	\$9,061.00

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under

- ☐ No
☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Describe below.	Sources of income Describe below.
	Gross income from each source (before deductions and exclusions)	Gross income from each source (before deductions and exclusions)
From January 1 of the current year until		
For the last calendar year: (January 1 to December 31 ²⁰¹⁵) YYYY		
For the calendar year before that: (January 1 to December 31 ²⁰¹⁴) YYYY		

Debtor 1 **Angel** **L.** **Moina** Case number (if known) **16-10253**
First Name Middle Name Last Name

	Debtor 1	Debtor 2
Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.
		Gross income from each source (before deductions and exclusions)
From January 1 of the current year until		
For the last calendar year: (January 1 to December 31 2015) YYYY	Unemployment Compens \$6,396.00	
For the calendar year before that: (January 1 to December 31 2014) YYYY		

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

- ☒ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more?

- ☒ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support

* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.

- ☐ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☐ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support

Debtor 1 **Angel** **L.** **Moina** Case number (if known) **16-10253**
First Name Middle Name Last Name

- 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**
Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic

☒ No
☐ Yes. List all payments to an insider.

- 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

☒ No
☐ Yes. List all payments that benefited an insider.

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

- 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody

☐ No
☒ Yes. Fill in the details.

<p>Case title Maria Moina</p> <p>Case number _____</p>	<p>Nature of the case</p>	<p>Court or agency</p> <p>_____</p> <p>Court Name</p> <p>_____</p> <p>Number Street</p> <p>_____</p> <p>City State ZIP Code</p>	<p>Status of the case</p> <p><input type="checkbox"/> Pending</p> <p><input type="checkbox"/> On appeal</p> <p><input checked="" type="checkbox"/> Concluded</p>
<p>Case title NYS Tax Commissioner v. Angel Moina</p> <p>Case number _____</p>	<p>Nature of the case Tax Case</p>	<p>Court or agency</p> <p>_____</p> <p>Court Name</p> <p>_____</p> <p>Number Street</p> <p>_____</p> <p>City State ZIP Code</p>	<p>Status of the case</p> <p><input type="checkbox"/> Pending</p> <p><input type="checkbox"/> On appeal</p> <p><input checked="" type="checkbox"/> Concluded</p>
<p>Case title NYS Tax Commissioner v, Maria J, Moina</p> <p>Case number _____</p>	<p>Nature of the case Tax Case</p>	<p>Court or agency</p> <p>_____</p> <p>Court Name</p> <p>_____</p> <p>Number Street</p> <p>_____</p> <p>City State ZIP Code</p>	<p>Status of the case</p> <p><input type="checkbox"/> Pending</p> <p><input type="checkbox"/> On appeal</p> <p><input checked="" type="checkbox"/> Concluded</p>

Debtor 1 **Angel** **L.** **Molina** Case number (if known) **16-10253**
First Name Middle Name Last Name

- 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**
Check all that apply and fill in the details below.

- ☒ No. Go to line 11.
☐ Yes. Fill in the information below.

- 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**

- ☒ No
☐ Yes. Fill in the details.

- 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of**

- ☒ No
☐ Yes

Part 5: List Certain Gifts and Contributions

- 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?**

- ☒ No
☐ Yes. Fill in the details for each gift.

- 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600**

- ☒ No
☐ Yes. Fill in the details for each gift or contribution.

Part 6: List Certain Losses

- 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire,**

- ☒ No
☐ Yes. Fill in the details.

Part 7: List Certain Payments or Transfers

- 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to**

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

- ☐ No
☒ Yes. Fill in the details.

Description and value of any property transferred		Date payment or transfer was made	Amount of payment
Victor J. Molina Person Who Was Paid			
930 Grand Concourse Number Street		11/20/2015	\$900.00
#1A			
Bronx City	NY State	10451 ZIP Code	
Email or website address			
Person Who Made the Payment, if Not You			

Debtor 1 Angel L. Moina Case number (if known) 16-10253
First Name Middle Name Last Name

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to

Do not include any payment or transfer that you listed on line 16.

- ☒ No
☐ Yes. Fill in the details.

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property).

- ☒ No
☐ Yes. Fill in the details.

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

- ☒ No
☐ Yes. Fill in the details.

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage

- ☒ No
☐ Yes. Fill in the details.

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No
☐ Yes. Fill in the details.

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No
☐ Yes. Fill in the details.

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No
☐ Yes. Fill in the details.

Debtor 1 Angel L. Moina Case number (if known) 16-10253
First Name Middle Name Last Name

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental

☒ No
☐ Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

☒ No
☐ Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and

☒ No
☐ Yes. Fill in the details.

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☒ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
- ☒ A partner in a partnership
- ☐ An officer, director, or managing executive of a corporation
- ☐ An owner of at least 5% of the voting or equity securities of a corporation

☐ No. None of the above applies. Go to Part 12.
☒ Yes. Check all that apply above and fill in the details below for each business.

GAVIOTA'S RESTAURANT AND SPO Business Name	Describe the nature of the business Restaurant Bar	Employer Identification number Do not include Social Security number or ITIN.
600 WEST 142ND STREET Number Street	Name of accountant or bookkeeper	EIN: _ _ - _ _ _ _ _
New York City	NY State	10031 ZIP Code
		Dates business existed From _____ To <u>09/30/2014</u>

Debtor 1 Angel L. Moina Case number (if known) 16-10253
First Name Middle Name Last Name

Describe the nature of the business
La Posada Restaurant & Sports Bar
Business Name

Employer Identification number
Do not include Social Security number or ITIN.

600 WEST 142ND STREET **Name of accountant or bookkeeper**
Number Street

EIN: _ _ - _ _ _ _ _

Dates business existed

From _ _ **To** 09/30/2014

New York NY 10031
City State ZIP Code

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business?
Include

- ☒ No
☐ Yes. Fill in the details below.

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years,

X /s/ Angel L. Moina
Angel L. Moina, Debtor 1
Date 04/08/2016

X /s/ Jennifer Janet Moina
Jennifer Janet Moina, Debtor 2
Date 04/08/2016

Did you attach additional pages to your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

- ☒ No
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☒ No
☐ Yes. Name of person _____ Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).